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**PATENT APPLICATION FEE DETERMINATION RECORD**

Substitute for Form PTO-875

Application or Docket Number

09171033

**CLAIMS AS FILED - PART I**

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

\* If the difference in column 1 is less than zero, enter "0" in column 2.

**SMALL ENTITY**

OR

**OTHER THAN  
SMALL ENTITY**

RATE	FEE
	\$ _____
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL	

OR

OR

OR

OR

OR

OR

RATE	FEE
	\$ _____
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL	

**CLAIMS AS AMENDED - PART II**

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(d))	16	Minus 20	4
Independent (37 CFR 1.16(b))	2	Minus 3	3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

**SMALL ENTITY**

OR

**OTHER THAN  
SMALL ENTITY**

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

OR

OR

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	990

4.27-06

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(d))	19	Minus 20	1
Independent (37 CFR 1.16(b))	3	Minus 3	3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

OR

OR

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(d))	*	Minus	*
Independent (37 CFR 1.16(b))	*	Minus	*
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

OR

OR

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2000

Application or Docket Number

09761033

**CLAIMS AS FILED - PART I**

	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA
TOTAL CLAIMS	27	
FOR		
TOTAL CHARGEABLE CLAIMS	27 minus 20 = 7	7
DEPENDENT CLAIMS	3 minus 3 = 0	0
MULTIPLE DEPENDENT CLAIM PRESENT	<input type="checkbox"/>	

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

01/31/04

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) NUMBER CLAIMS PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	14	27	
Independent	3	3	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>		

7/29/05

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) NUMBER CLAIMS PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	14	27	
Independent	2	3	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>		

12/13/05

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) NUMBER CLAIMS PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	16	27	
Independent	2	3	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>		

\* If the entry in column 1 is less than the entry in column 2, enter "0" in column 3.  
 \* If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20".  
 \* If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3".  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number entered in the appropriate box in column 1.

SMALL ENTITY TYPE <input type="checkbox"/>		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
BASE FEE	300.00	OR	BASE FEE	710.00
X50-		OR	X510-	126-
X40-		OR	X30-	
+125-		OR	+270-	
TOTAL		OR	TOTAL	226-

SMALL ENTITY TYPE <input type="checkbox"/>		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X50-		OR	X510-	
X40-		OR	X30-	
+125-		OR	+270-	
TOTAL ADJUST. FEE		OR	TOTAL ADJUST. FEE	

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X50-		OR	X510-	
X40-		OR	X30-	
+125-		OR	+270-	
TOTAL ADJUST. FEE		OR	TOTAL ADJUST. FEE	

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X50-		OR	X510-	
X40-		OR	X30-	
+125-		OR	+270-	
TOTAL ADJUST. FEE		OR	TOTAL ADJUST. FEE	

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### Application of Chapter 10 Number

09761033

**SECRET**

**Figure 2**

**SMALL-ENTRY  
TUNE** 

**ON CALL EVERY**

\* If the difference in column 1 is less than zero, enter "V" in column 2

**Figure 1**

## CONCLUSIONS

**Abstract**

## SMALL BOOTS

**OTHER THAN  
ON SMALL ENTITY**

	<b>ADD</b>
--	------------

02	12/10	
02	12/10	

**ADD**

REFER

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X50-		OR	X510-	
X40-		OR	X30-	
X40-		OR	X70-	
NOOK ADDITIONAL FEE		OR	NOOK ADDITIONAL FEE	

\* If quantity is unknown, 1 (one) must be entered in column 2, with "0" in column 3.  
 \* If the "Total Number Products Paid For" in THIS SPACE is less than 25, enter "0".  
 \* If the "Total Number Products Paid For" in THIS SPACE is less than 25, enter "0".  
 \* The "Total Number Products Paid For" must be entered in the "Total Number Products Paid For" column in the continuation box in column 2.

\_\_\_\_\_

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